CAMPAIGN FINANCE REPORT Name and Address of Filing Candidate or Committee Lisa Scheller Name: 751 Benner Rd Address: Allentown PA 18104 City, State, Zip: **Report Filed By** X Committee Candidate **Election Date** Amended Termination Type of Report Annual 2011 YES YES TERMINATION REPORT No No **County** Office Sought By Candidate **Party** Lehigh County Commissioner Lehigh R **Summary of Receipts & Expenditures** 11/29/2011 12/31/2011 To: From: (59,275.00) A. Amount Brought Forward From Last Report 6,200.00 B. Total Monetary Contributions & Receipts (from Schedule I) C. Total Funds Available (Sum of Lines A & B) (53,075.00) (3,750.00) D. Total Expenditures (from Schedule III) (56,825.00) E. Ending Cash Balance (Subtract Line D from Line C) F. Value of In-Kind Contributions Received (from Schedule II) 7,152.74 0.00G. Unpaid Debts & Obligations (from Schedule IV)

^{*}Complete reports including signatures are on file in the Office of Voter Registration.

SCHEDULE I

PAGE 2 OF

CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate USA SCHEWER	Reporting Pe	10d 29	2011 to 12 31 2011
TOTAL See the Peresting Period		1	πολ Ø
TOTAL for the Reporting Perio	u (,,	*	T
PERSONAL PRIBUTE ON SESSON OF SESSON OF THE PARTY AND PARTY	B)	9- 41- 4: 	
Contributions Received from Political Committees (Part A)		\$	Ø
All Other Contributions (Part B)		\$	(Ø
TOTAL for the Reporting Perio	d (2)	\$	Ø
SEE CONTENDED TO VERTICAL STREET STOOMS THOM SAME CAN DE SAME OF			
Contributions Received from Political Committees (Part C)		\$	Ø
All Other Contributions (Part D)		\$	Ø
TOTAL for the Reporting Perio	od (3)	\$	Ø
A THER RECEIPING PRESIDENT NITEREST EXPINED RETURNED OF		1	
TOTAL for the Reporting Period	od (4)	\$	6,200.00
TOTAL MONETARY CONTRIBUTIONS AND RECEIPTS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B.)		\$	6,200.00

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Reporting Period

PART E OTHER RECEIPTS

REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC.

Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

Name of Filing Committee or Candidate			Reporting	Period	2011 12/2/2
USA SCHEWER			From	11/29/	2011 to 12 31 2011
FULL USA SCHEUER	J				
Mailing Address BENNER ROAT					
A WENTOWN	TA.	Zip Code (Plus 4) 18104 - 12	6. DAY 2 7	2011	\$ 6,200.00
Receipt Description LEPAYMENT OF MONIES	w	thed .			
Full Name					
Mailing Address					
City	State	Zip Code (Plus 4)	0	\$ EST 7.13 = #	Amount \$
Receipt Description	I				
Full Name					
Mailing Address					
City	State	Zip Code (Plus 4)	O, III S DAY	VEAU.	Amount \$
Receipt Description	i				
Full Name					
Mailing Address					
City	State	Zip Code (Plus 4)	DEE SAY	E NAME	Amount \$
Receipt Description			<u> </u>		4
Full Name					
Mailing Address			<u>.</u>	<u> </u>	
City	State	Zip Code (Plus 4)	O. DAY	GE BYEARS	
Receipt Description		-			\$
Full Name				·	
Mailing Address		<u></u>			
City	E+++-	Zio Code (Plus 4)	io.		Amount
	State	Zip Code (Plus 4)		ongé ##5.4 / _`. 9987	\$
Receipt Description					· · ·
					PAGE TOTAL
Enter Grand Total of Part E on School	dule i	, Detailed Summary Pa	ge, Secti	ion 4.	\$6,200.00

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SCHEDULE II

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IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED

USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS DURING THE REPORTING PERIOD.

Detailed Summary Page

Name of Filing Committee or Candidate USA SCHEWEL	Reporting Period From 11 29 204 To 12 31 20 H
	10 _ (0.100)
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TOTAL for the	e Reporting Period (1) \$
ZENCKNO CONTRIBUTIONS RECEIVED TO VALUE O	975-\$350.01 - (6) \$250.00
TOTAL for the	Reporting Period (2) \$
3. IN-KIND CONTRIBUTION RECEIVED - VALUE OV	/ER \$280.00 FROM PART G
TOTAL for the	Reporting Period (3) \$ 7, 152, 74
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING REPORTING PERIOD (Add and enter amount totals from and 3; also enter on Page 1, Report Cover Page, Item	rom Boxes 1, 2, \$ 1 \(\cappa \) \(\sigma \)

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SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate	Reporting Period	- 12/2/2
LISA SCHEWER	From 11 29 1	2011 TO 12/31/2011
	DATE	ÂMOUNT
MY LEHIGH COUNTY PAC	12 31 2011	\$ 2,372,74
Matting Address BOX 3012	NOTES DAYS VEAR	\$
CITY State Zip Code (Plus 4) PA 18/06		\$
Employer of Contributor	Occupation	
Employer Mailing Address/Principal Place of Business	Description of Contribution CAMPAIGN 1	HOVERISING
Full Name of Committon PAC	12 7 20 M	\$ 4,780.00
10 SOUTH COMMERCE WAY	MO COAVA MENTAL	\$
City BETHEHEM PA 18017 -		\$
Employer of Contributor	Occupation	
Employer Mailing Address/Principal Place of Business	Description of Contribution	HOVERISING
Full Name of Contributor	第17条 张小溪 新 77条	\$
Mailing Address	MARIO DE LES PARES DA FORME	\$
City State Zip Code (Plus 4)	· · · · · · · · · · · · · · · · · · ·	\$
Employer of Contributor	Occupation	
Employer Mailing Address/Principal Place of Business	Description of Contribution	
Full Name of Contributor	Section and Control and I have	\$
Mailing Address	2000 全水海 2000	\$
City State Zip Code (Plus 4)	Car More Care Care Care Care Care Care Care Ca	\$
Employer of Contributor	Occupation	
Employer Mailing Addrass/Principal Place of Business	Description of Contribution	
Full Name of Contributor	网 计解码公 器 高723 解	\$
Mailing Address		\$
City State Zip Code (Plus 4)	每 // AE 基 // / 在 序 / // 连	\$
Employer of Contributor	Occupation	
Employer Mailing Address/Principal Place of Business	Description of Contribution	
Enter Count Total of Dans C an Onhadda W 1 10 1 C	PAGE TOTAL	
Enter Grand Total of Part G on Schedule II, In-Kind Contribu Summary Page, Section 3.	\$ 7,152.74	

DSEB-502 (7-99)

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate				Repor	ting P	eriod	ZOM TO 12/31/2011
LISA SCHEWER				Fro	m	1/2/11/	10 10 10 10 10 10 11 10 II
T. Whom Paid			va.		ay I	\$7.55E	Amounts - C
TO WHOM Paid SIN SIN SIN	1/10	NS	12 Descrip	1 2	2	Zon	\$ USD.D
Meiling Address MOUNTAIN LAUR	EL	Dave				UT70	N
COOPERS BURG	PA	Zip Code (Plus 4) 18036					
TO WHOM Paid LIE DENT FOR CONE			MO.	1	4	4011 2011	Amount 500. 00
Meiling Address BOX 442			Descrip	NHO	1 Expe	01767	υ
City a	State	Zip Code (Plus 4)					
TO Whom Paid DS OF STEVE WG	K	4	MD.	- ('	XX	ZO 11	\$ 2,500.00
Mahing Address BOX 534			Descrip	otion o	EXP	nditure 3017	\mathcal{M}
PAOL	PA	Zip Code (Plus 4)					
TO Whom Paid DS OF BOB ME	115		12	- (5	YEAN Zon	\$ 500 OV
Mailing Address (). 0 BOX 1016			Descrip	otion o	EXP	nditure BuT7	
QUALENTOWN	State	Zip Code (Plus 4)					
To Whom Paid	•		MO		A.V	YEAR	Amount \$
Mailing Address			Descri	ption o	f Expe	inditure	
City	State	Zip Code (Plus 4)					
To Whom Peid			M 0.	\$ 07.5	<u>V</u>	######################################	
Mailing Address			Descri	ption c	f Expe	inditure	\$
City	State	Zip Code (Plus 4)					
To Whom Paid			MO.		JAY I	YEAR	Amount
						enditure	\$
Mailing Address							
City	State	Zip Code (Plus 4)					
To Whom Paid			My.		DAY		Amount \$
Mailing Address			Descri	ption c	f Exp	nditura	
City	State	Zip Code (Plus 4)	1	-			
Enter Grand Total of Expenditures on Pag		Report Cover 5	ege.	tem	ח		* 3,750.00
Enter Grand Lotal of Expenditures on Pag	je i,	Report Cover F	-9a,		₽ .		<i>→ D₁ 1 30 .00</i>